

Organization ID # 0630422

State of origin KY

Filing fee \$130.00 Alison Lundergan Grimes, Secretary of State

## Commonwealth of Kentucky

0630422.08

dcmish  
PRPFAlison Lundergan Grimes  
Kentucky Secretary of State

Received and Filed:

8/8/2013 12:09 PM

Fee Receipt: \$130.00

Alison Lundergan Grimes  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

**Reinstatement Application and  
Reinstatement Annual Report**  
For the years 2012 through 2013

RST

**Exact limited partnership name and, if domestic, designated address or, if  
foreign, principal office address**

BHASIN FAMILY LIMITED PARTNERSHIP  
PO BOX 990  
ASHLAND KY 41105-0990

The principal office address and registered agent  
name/office address cannot be changed on this  
form. When reinstating, you cannot modify the  
addresses until the reinstatement is filed. Once the  
reinstatement is filed, the statement of change can be  
filed online at [app.sos.ky.gov](http://app.sos.ky.gov) or can be  
downloaded from our website.

**Registered Agent and Registered Office Address**

PRAMIT BHASIN  
421 BLUEBIRD DRIVE  
RUSSELL, KY 41169

**General partners** - List the name and address of the limited partnership's general partners. If not specified, addresses default to the partnership's designated office or principal office address.

PRAMIT BHASIN  
GARV BHASIN

The above entity was administratively dissolved on September 11, 2012 because the entity did not file its annual report for the year 2012. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name satisfies the requirements of KRS 362. Enclosed is a check in the amount of \$130.00, payable to Kentucky State Treasurer.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to BHASIN FAMILY LIMITED PARTNERSHIP to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

X

Signature of partner (Required)

President

Title (Required)

8/1/2013

Date (Required)



**THOMAS B. MILLER**  
Commissioner

**FINANCE AND ADMINISTRATION CABINET  
DEPARTMENT OF REVENUE  
OFFICE OF INCOME TAXATION**

**ELYSE WEIGEL**  
Deputy Commissioner

**BOB BROOKS**  
Executive Director

August 8, 2013

**BHASIN FAMILY LIMITED PARTNERSHIP  
PO BOX 990  
ASHLAND KY 41105-0990**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **BHASIN FAMILY LIMITED PARTNERSHIP** has filed Kentucky Income Tax Returns through the tax year ended December 31, 2012, and has paid the taxes shown to be due or assessed as of the date of this letter. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the limited partnership. This letter is valid for 30 days from the date of this letter.

Sincerely,

Gary Horne, Revenue Program Officer  
Division of Corporation Tax  
501 High Street, Mail Sta.52  
Frankfort, KY 40601  
502-564-7281  
FAX# 502-564-0058

Kentucky Secretary of State organization number 0630422